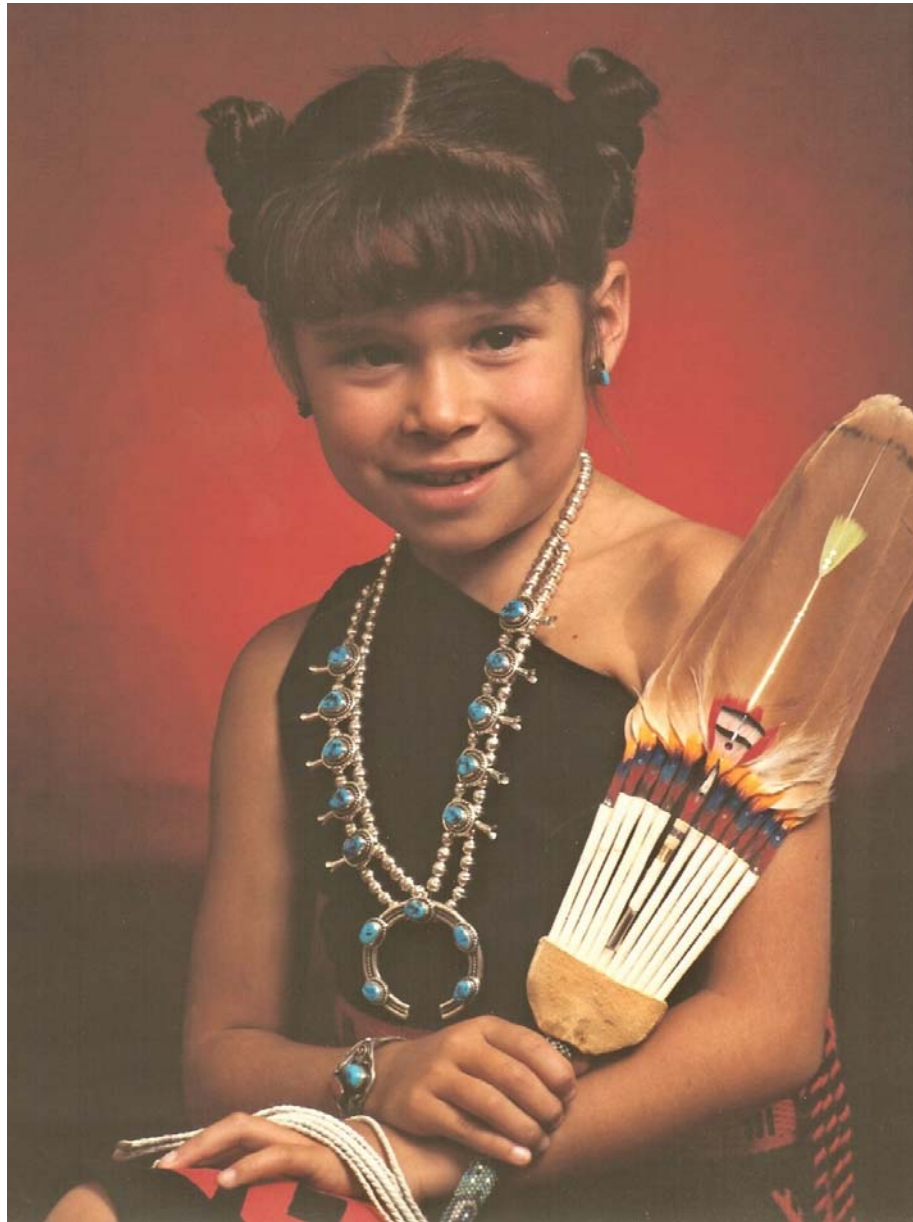


**12-AREA
SUMMARY REPORT
INDIAN HEALTH SERVICE**



**GOVERNMENT PERFORMANCE
RESULTS ACT 2005**

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Indian Health Service 12-Area Summary Report

INTRODUCTION

Government Performance and Results Act (GPRA) annual performance goals help the Indian Health Service (IHS) measure its progress in providing quality healthcare. The IHS Annual Performance Plan targets specific measures that include clinical care from two main categories: treatment and prevention. The specific groups within these categories are as follows: Diabetes Group, Oral Health Group, Immunization Group, Cancer Screening Group, Alcohol and Substance Abuse Group, Family Abuse, Violence, and Neglect Group, Developmental Treatment and Prevention Group, and HIV/AIDS Group. These measures reflect the top 10 Tribal Health Priorities.

MATERIALS AND METHODS

This report is a companion document to the 2005 Executive Summary and is designed to provide comparative information about Area-level performance. It contains data about selected clinical measures that were collected at the individual health facility level, using Clinical Reporting System (CRS) software, version 5.1. Not all data collected by CRS software is matched to a specific GPRA measure, nor are all GPRA measures captured by CRS software. Results for Diabetic Retinopathy are based on limited CRS data and have not yet been calculated.

The graphs for the clinical measures display results by Area for GPRA Year (GY) 2004 and GY 2005 (The GPRA year begins July 1 and ends June 30) and include definitions of the numerator and denominator for each measure, as well as the specific number of patients in the denominator for each Area. Each graph also indicates the IHS average for GY04 and GY05 and includes either the Healthy People 2010 or IHS 2010 goal for the measure. Areas can use the graphs to review the change in their performance from GY 2004 to GY 2005, to compare their performance to that of other Areas or to the national average, and to assess their progress towards achieving long-term goals.

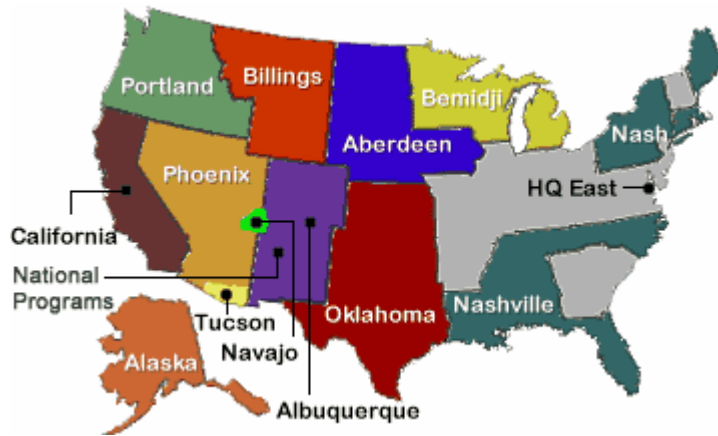
The information presented in this report was extracted from the Resource and Patient Management System (RPMS) databases of 182 health programs distributed among the 12 IHS Service Areas (Aberdeen, Alaska, Albuquerque, Bemidji, Billings, California, Nashville, Navajo, Oklahoma, Phoenix, Portland, and Tucson), representing approximately 1.3 million active Indian users.

RESULTS

In GY 2005, there were a total of 36 GPRA measures, including clinical and non-clinical measures. This report provides a summary of results for 20 clinical measures reported through CRS, including graphs for eighteen. This report also includes results for the Childhood Immunization measure, which is compiled from immunization reports. Of these twenty-one, twenty met their pre-determined targets and fourteen measures not only met, but exceeded their target (Appendix A). Only one of the 2005 measures, BMI Assessment, did not meet the target, reaching a national average of 64%, 1% below the 2005 target of a 5% increase from the GY 2004 rate (60%). The achieved 4% increase is still laudable, given the ambitious one year goal.

In accordance with the “One HHS” 10 Department-side Management Objectives, the Indian Health Service is committed to implementing results-oriented management by achieving a 10 percent relative increase in program performance by FY 2007 in four distinct measures; Pneumovax Immunization, Domestic Violence/Intimate Partner Violence Screening, Fetal Alcohol Syndrome Screening, as well as LDL Screening in patients with diabetes. The GY05 results show a significant increase in rates for two of these four measures, with absolute increases of 9% and 4% for DV/IPV and FAS, respectively. The 10% relative increase for these two measures was already met and exceeded in 2005

2005 National Average of Sites Reporting: 96%
1,324,303 patients



IHS AREA	GPRA POPULATION 2005	NPIRS POPULATION 2004	2005 Percent Reporting	2004 Percent Reporting
Aberdeen	117,880	115,812	100%	99%
Alaska	114,776	125,759	91%	96%
Albuquerque	84,483	86,624	98%	100%
Bemidji	78,269	87,234	90%	73%
Billings	56,018	69,560	81%	81%
California	68,971	71,696	96%	99%
Nashville	39,004	39,649	98%	95%
Navajo	224,927	227,095	99%	100%
Oklahoma	284,318	296,125	96%	59%
Phoenix	157,449	144,694	100%	99%
Portland	80,421	96,812	83%	74%
Tucson	17,787	24,009	74%	76%
Total, All Areas	1,324,303	1,385,069	96%	86%

The numerator is the GPRA 2005 population.

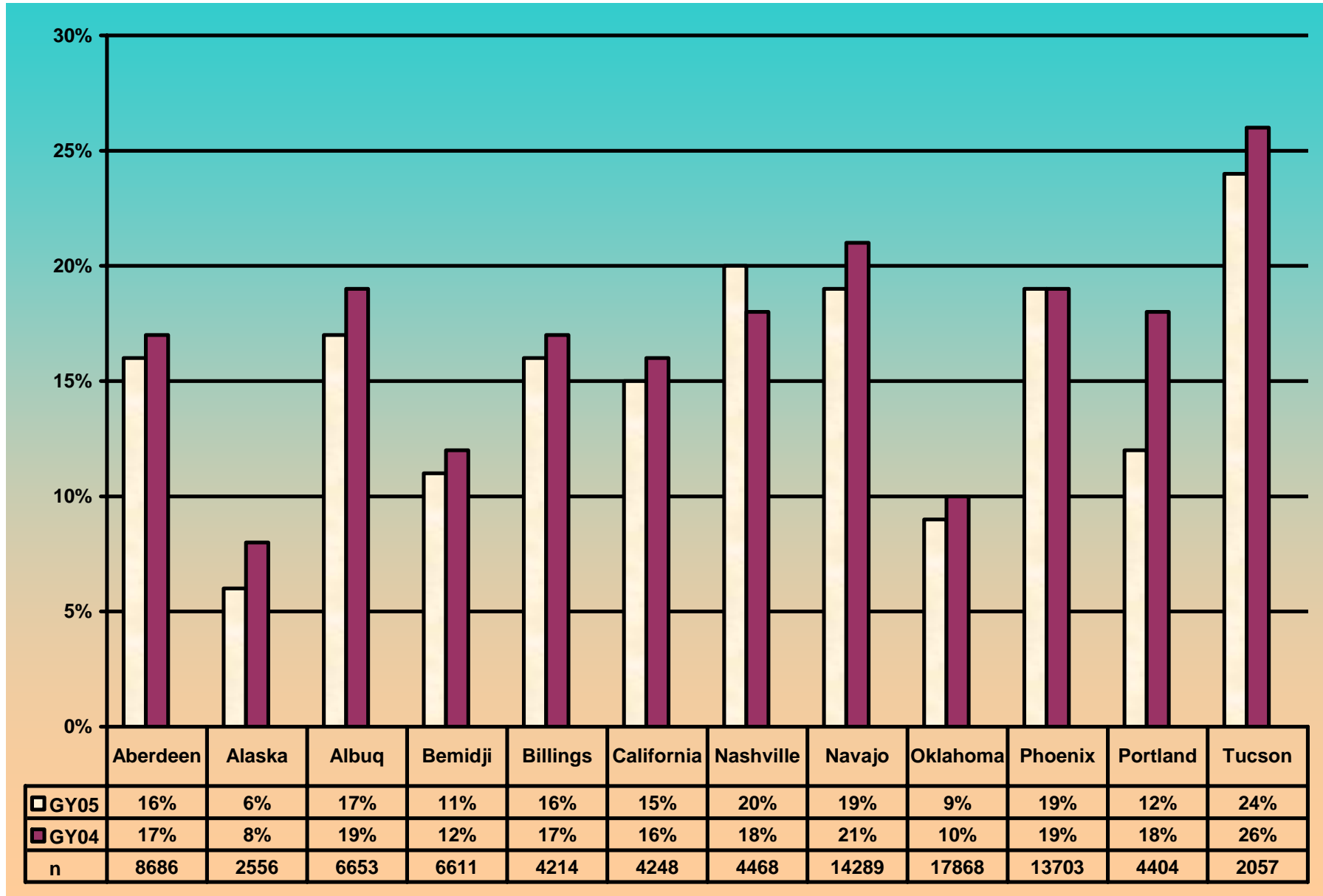
The denominator is the Active Indian Registrants from NPRS 2004 data

POOR GLYCEMIC CONTROL

GY05 National Average = 15%*

GY04 National Average = 17%*

2010 Goal = 10%*



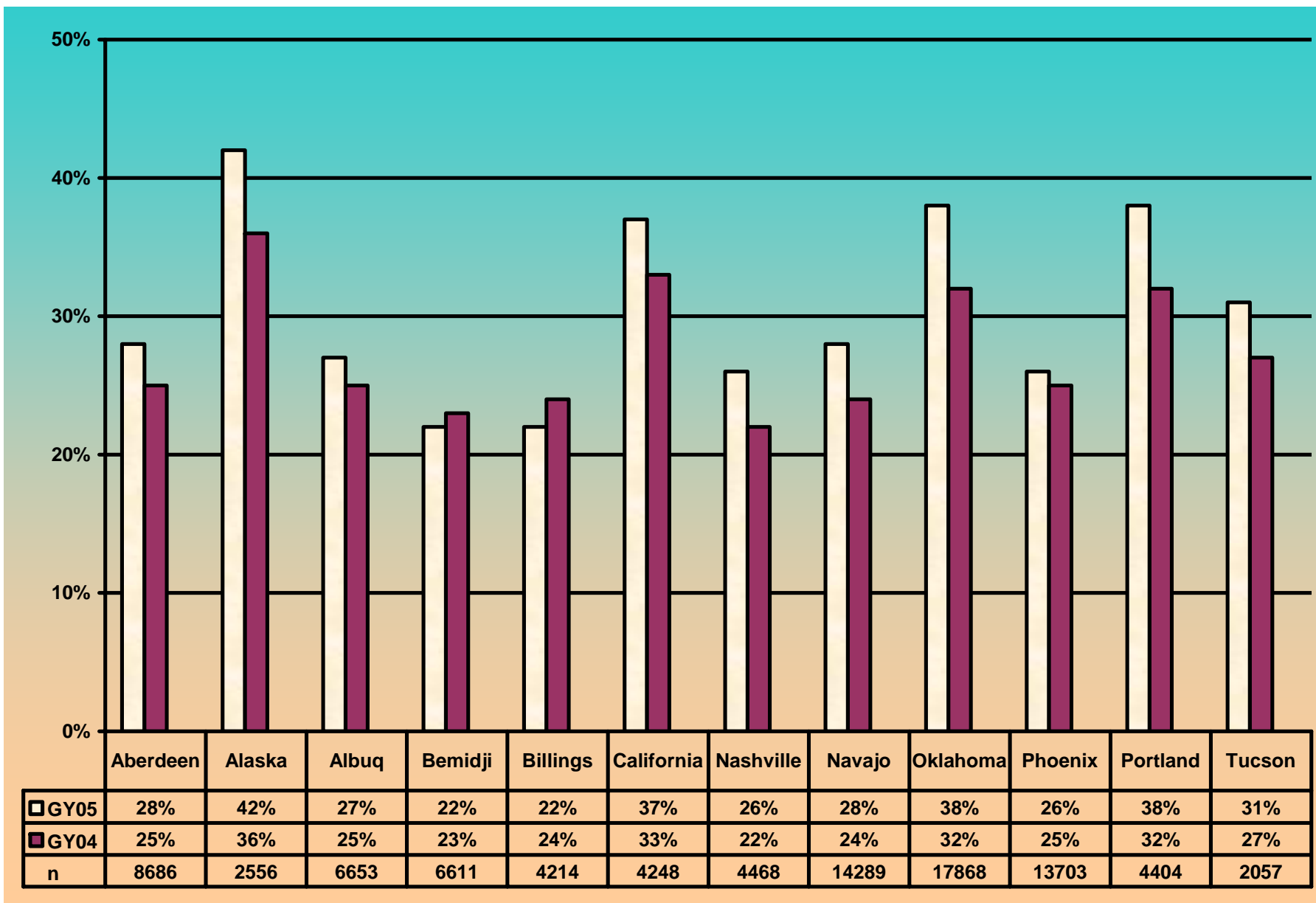
Numerator: A1c levels equal to or greater than 9.5

Denominator: Active Diabetic patients

*The goal for this measure is a reduction in the rate.

IDEAL GLYCEMIC CONTROL

GY05 National Average = 30%
 GY04 National Average = 27%
 2010 Goal = 40%



Numerator: A1c levels less than 7

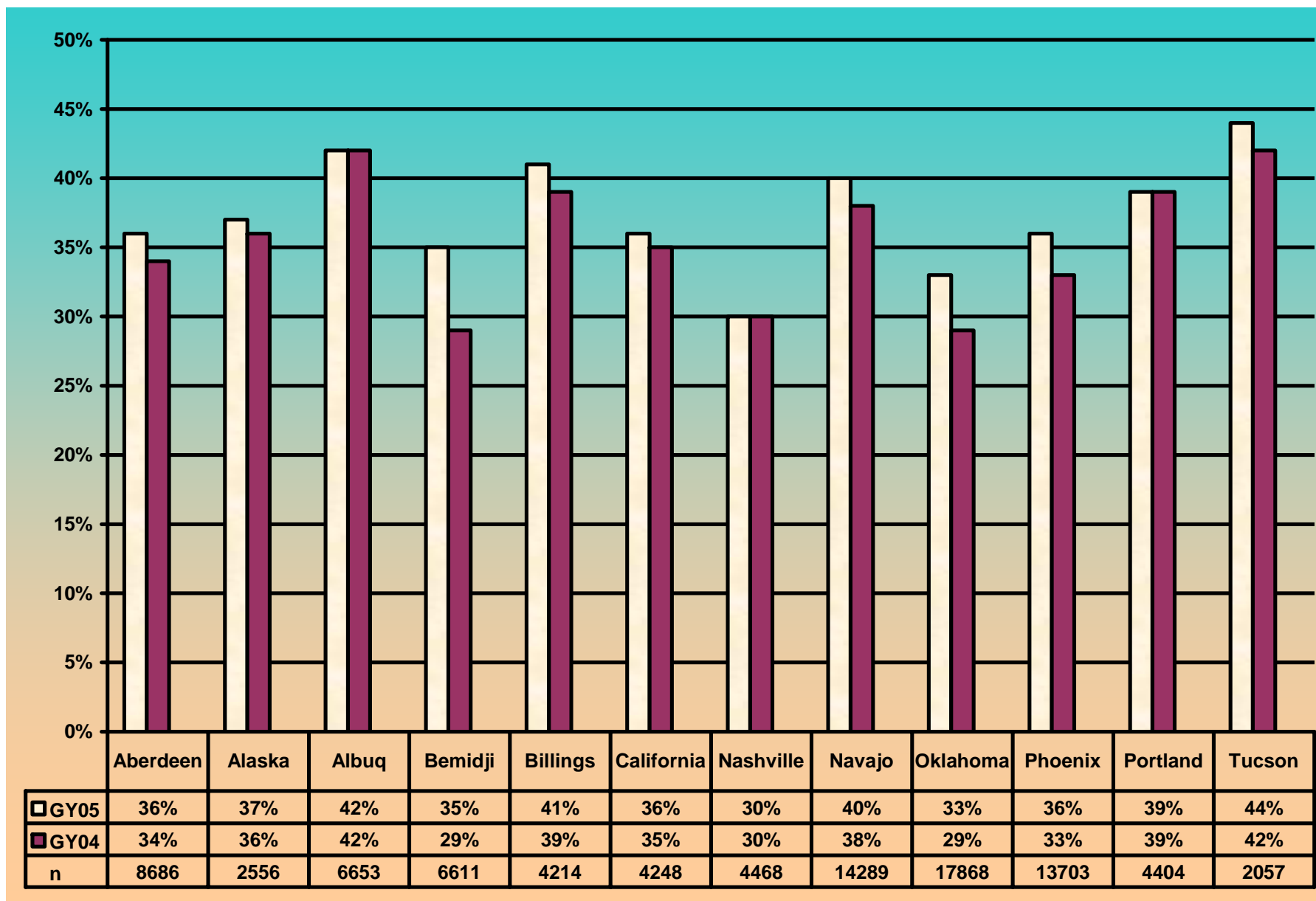
Denominator: Active Diabetic patients

CONTROLLED BLOOD PRESSURE (Diabetes)

GY05 National Average = 37%

GY04 National Average = 35%

2010 Goal = 50%



Numerator: The mean of the 3 most recent BP values documented <130/80

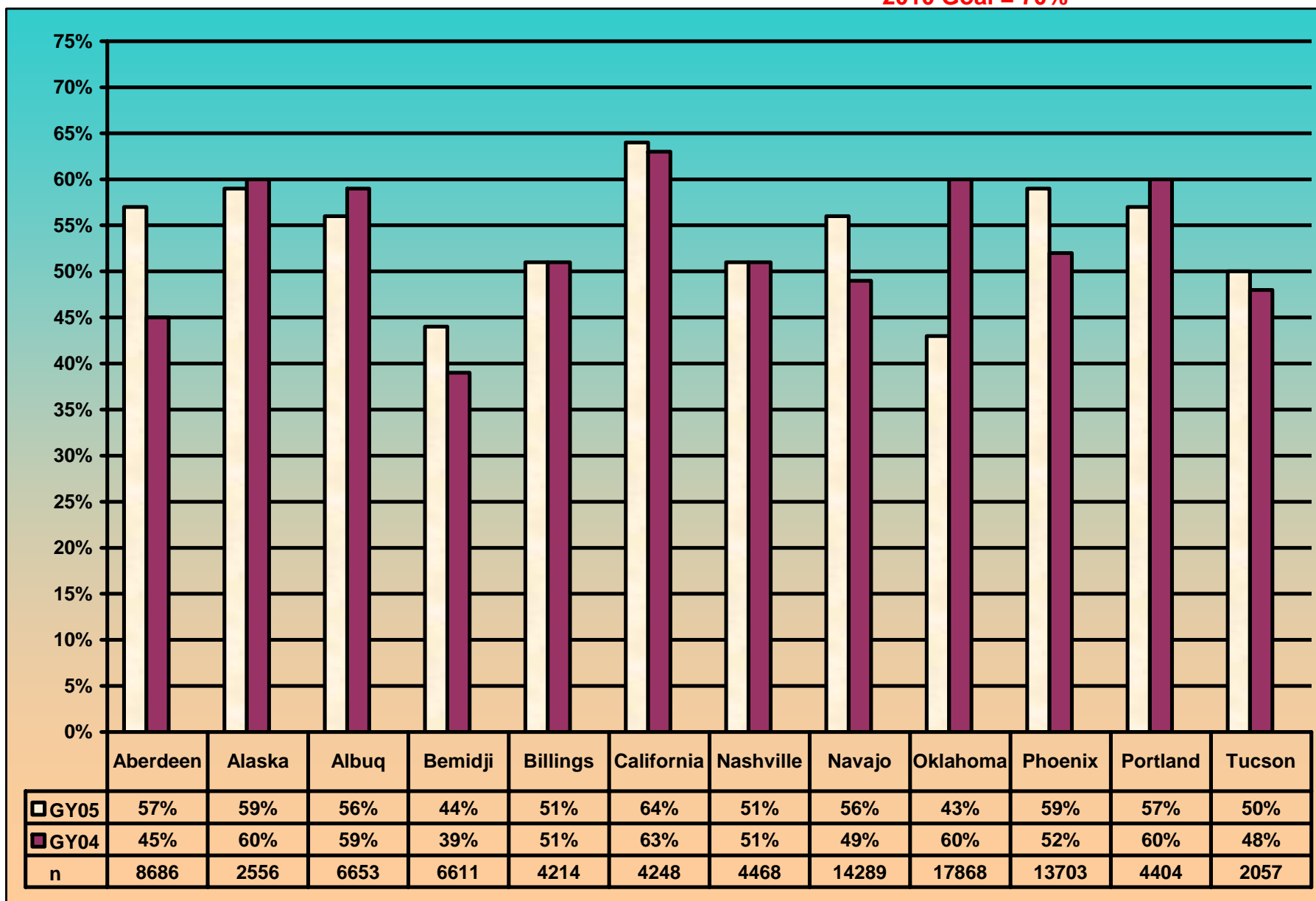
Denominator: Active Diabetic patients

LDL/CHOLESTEROL ASSESSED (Diabetes)

GY05 National Average = 53%

GY04 National Average = 53%

2010 Goal = 70%



Numerator: *Patients with LDL completed during the report period*

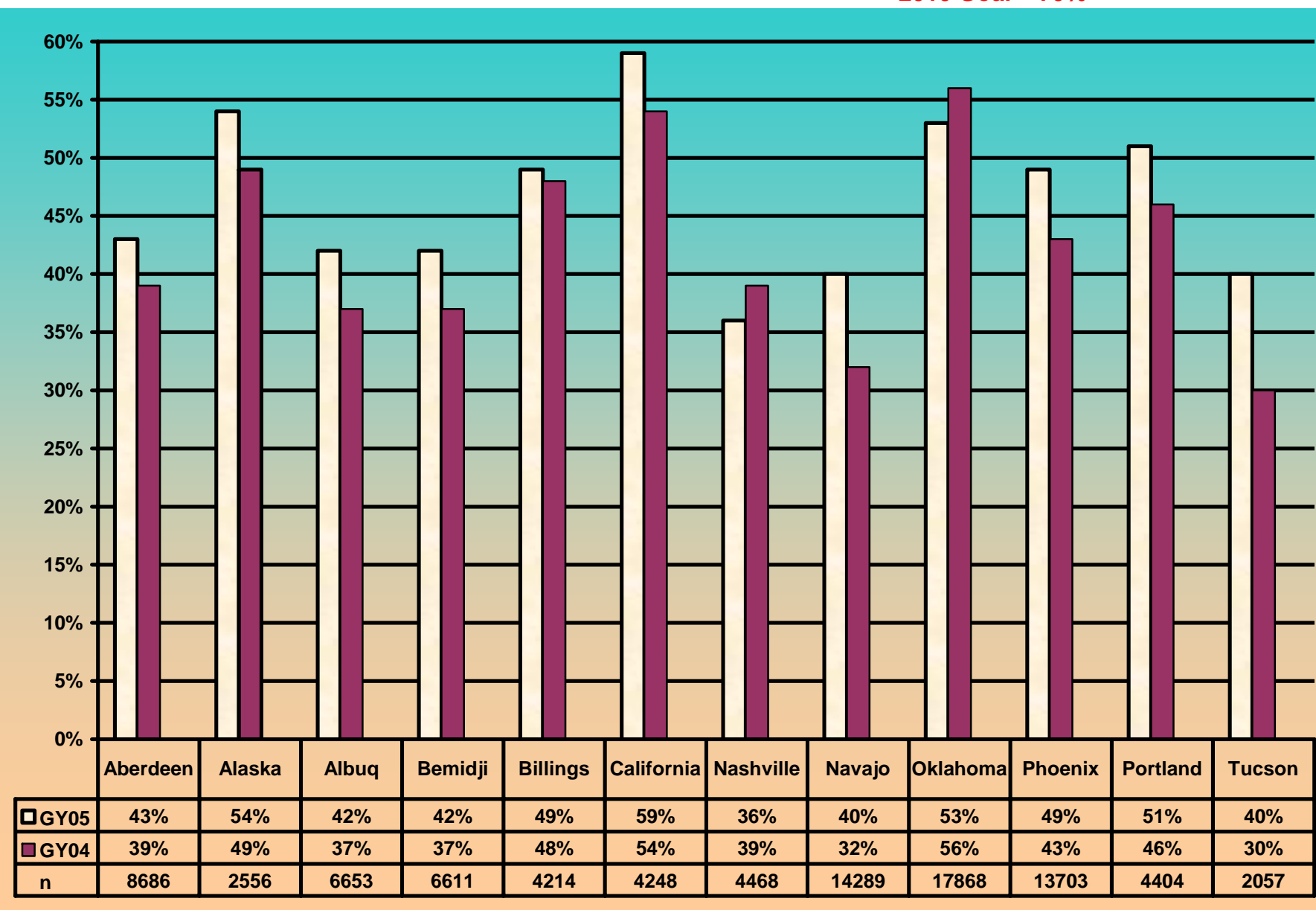
Denominator: *Active Diabetic patients*

NEPHROPATHY ASSESSED (Diabetes)

GY05 National Average = 47%

GY04 National Average = 42%

2010 Goal = 70%



Numerator: Patients with positive urine protein test or microalbuminuria

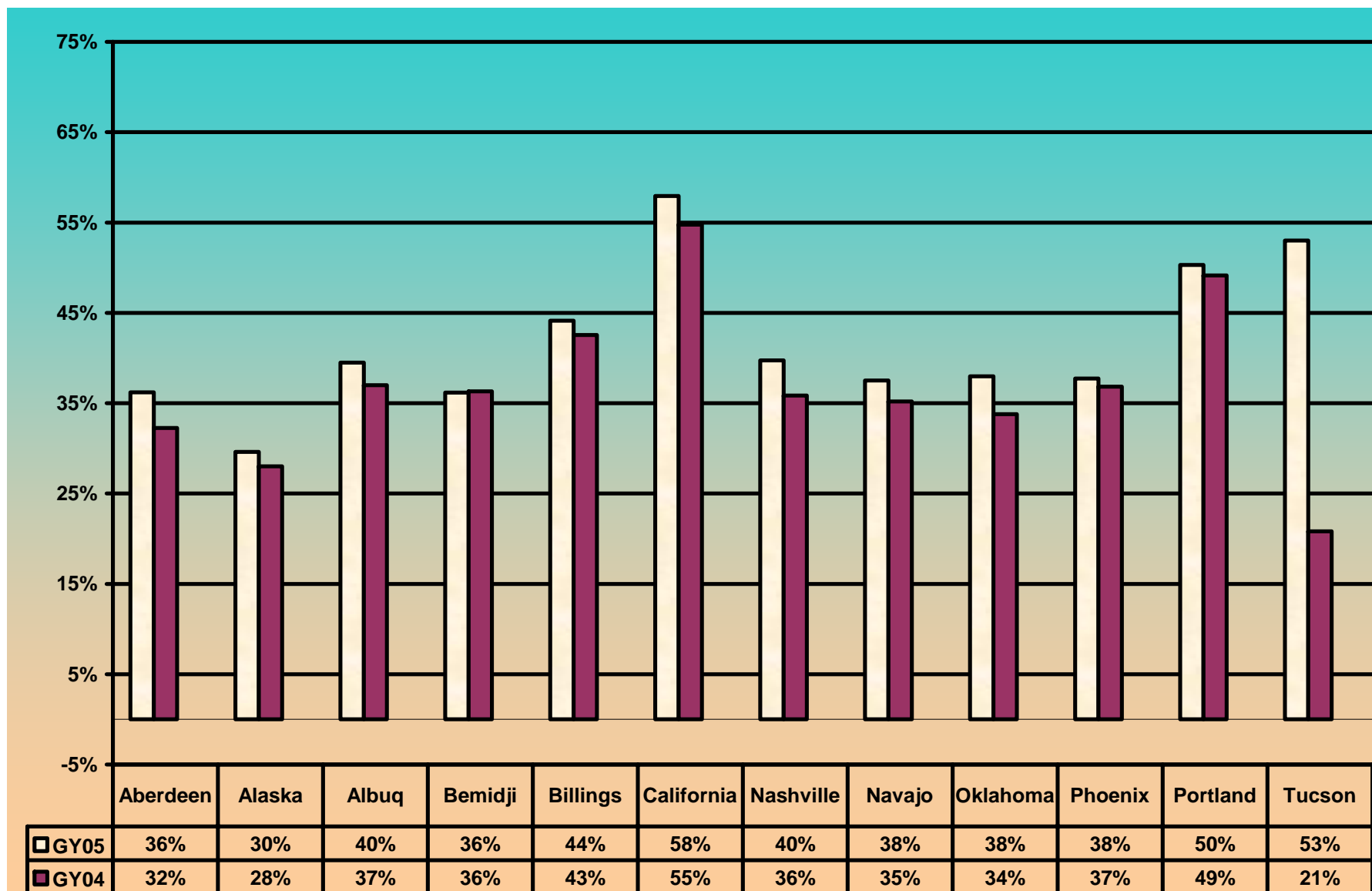
Denominator: Active Diabetic patients

DENTAL ACCESS (Diabetes)

GY05 National Average = 39%

GY04 National Average = 37%

2010 Goal = 70%



Numerator: *Patients with documented dental visits*

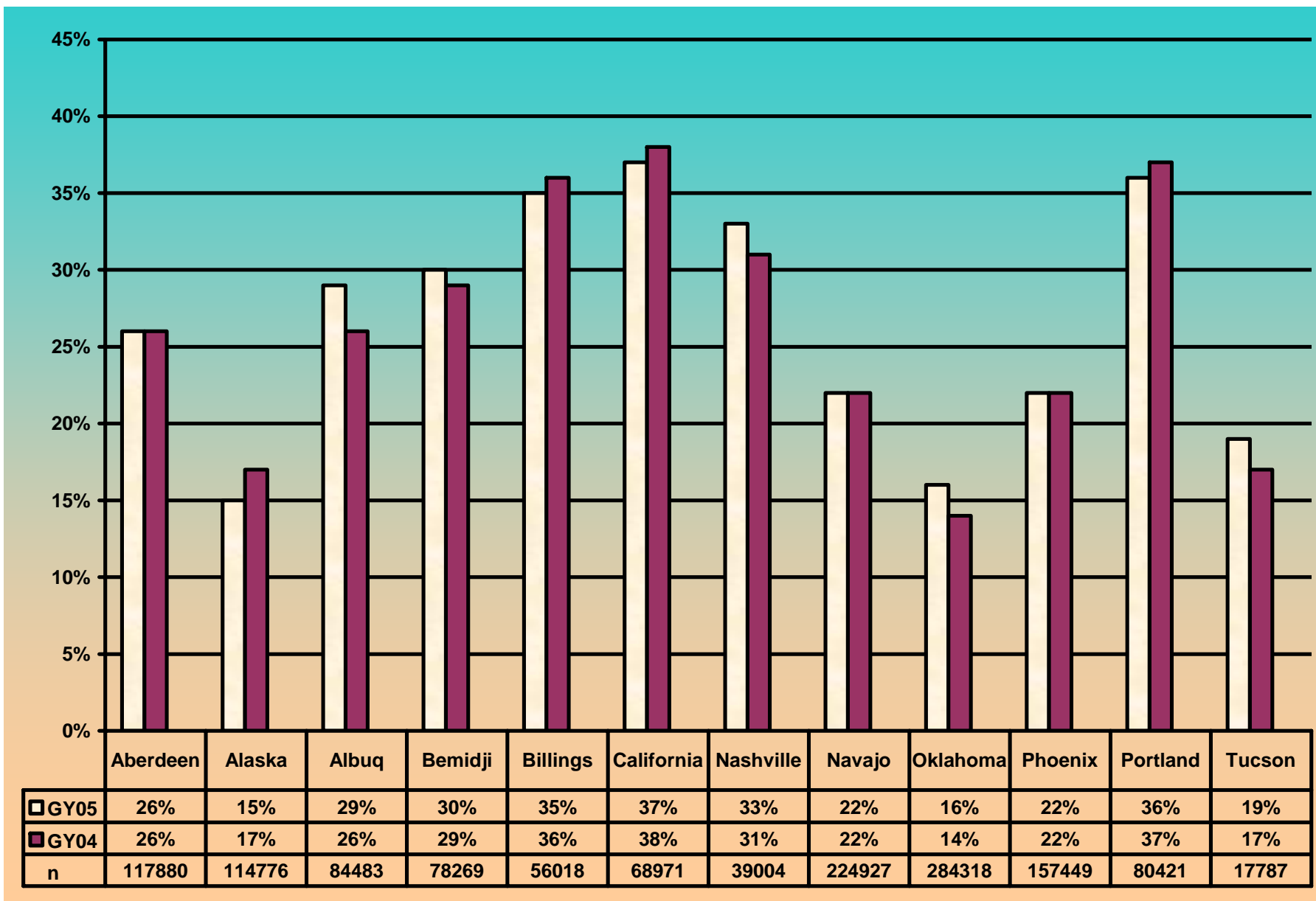
Denominator: *Active Diabetic patients*

DENTAL ACCESS – GENERAL

GY05 National Average = 24%

GY04 National Average = 24%

2010 Goal = 40%



Numerator: *Patients with documented dental visit*

Denominator: *GPRA user population patients*

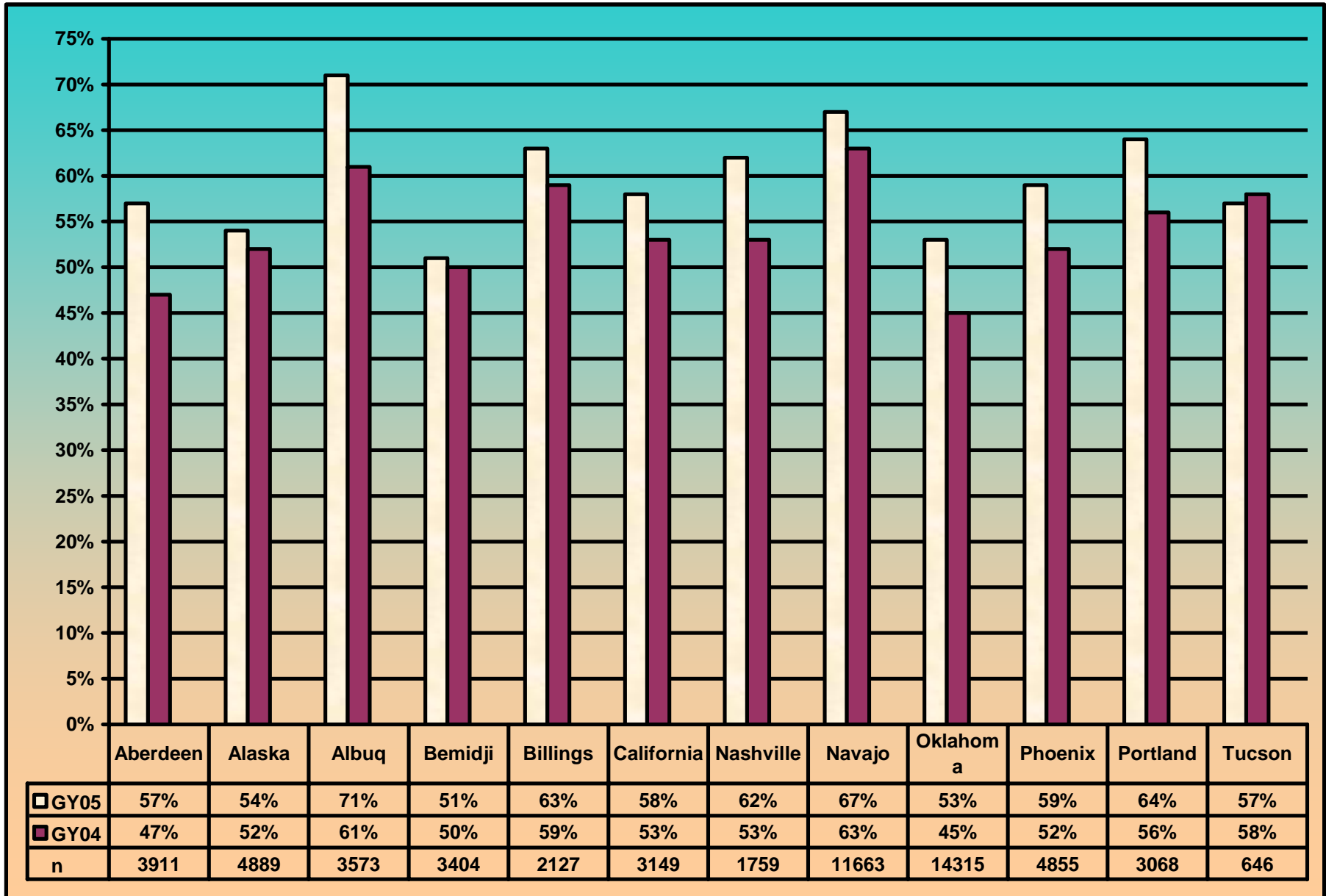
INFLUENZA IMMUNIZATION

(Measure placed on hold because of 2004 National vaccine shortage)

GY05 National Average = 59%

GY04 National Average = 54%

2010 Goal = 90%



Numerator: Patients with influenza vaccine documented

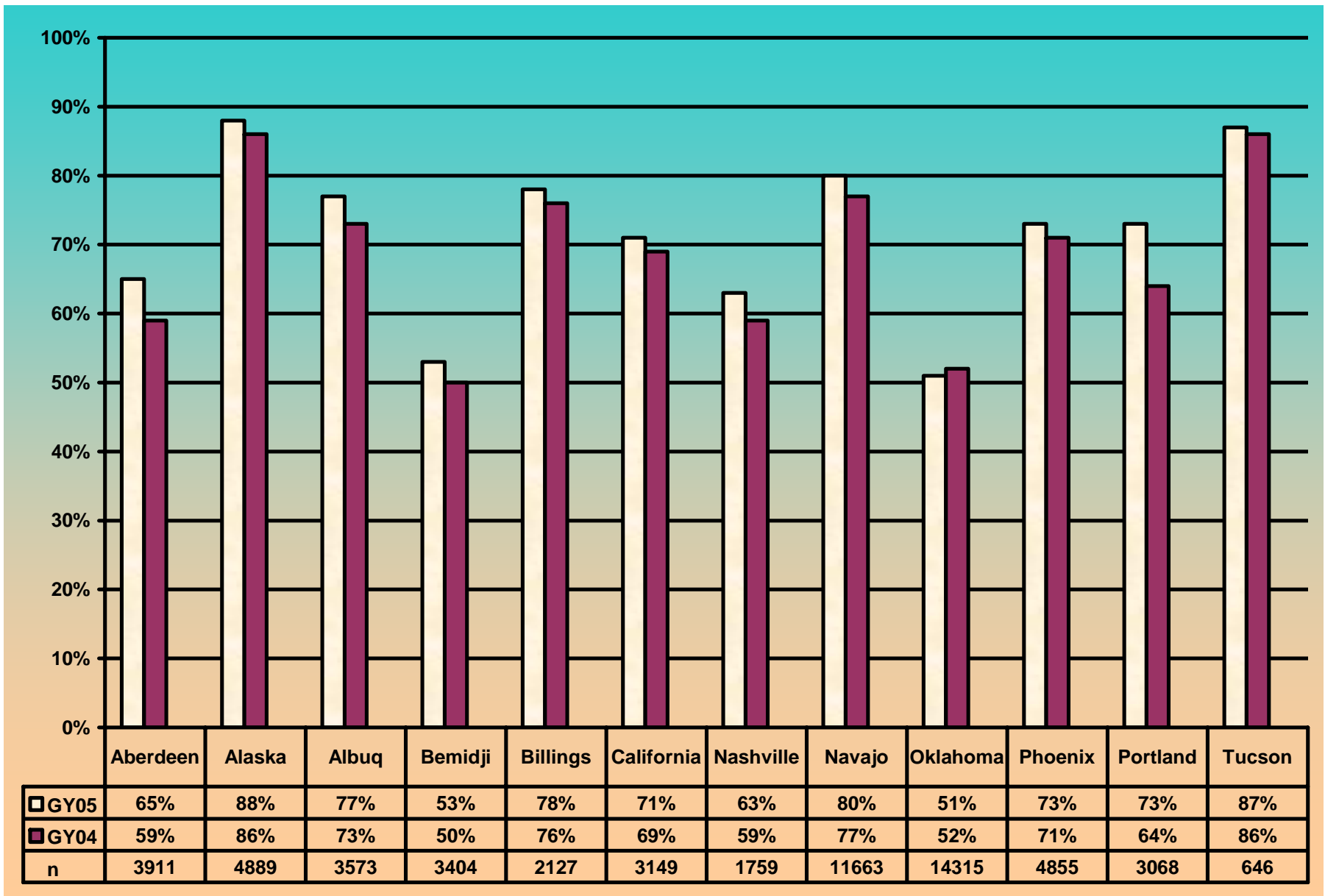
Denominator: Active Clinical patients 65 and older

PNEUMOVAX IMMUNIZATION

GY05 National Average = 69%

GY04 National Average = 69%

2010 Goal = 90%

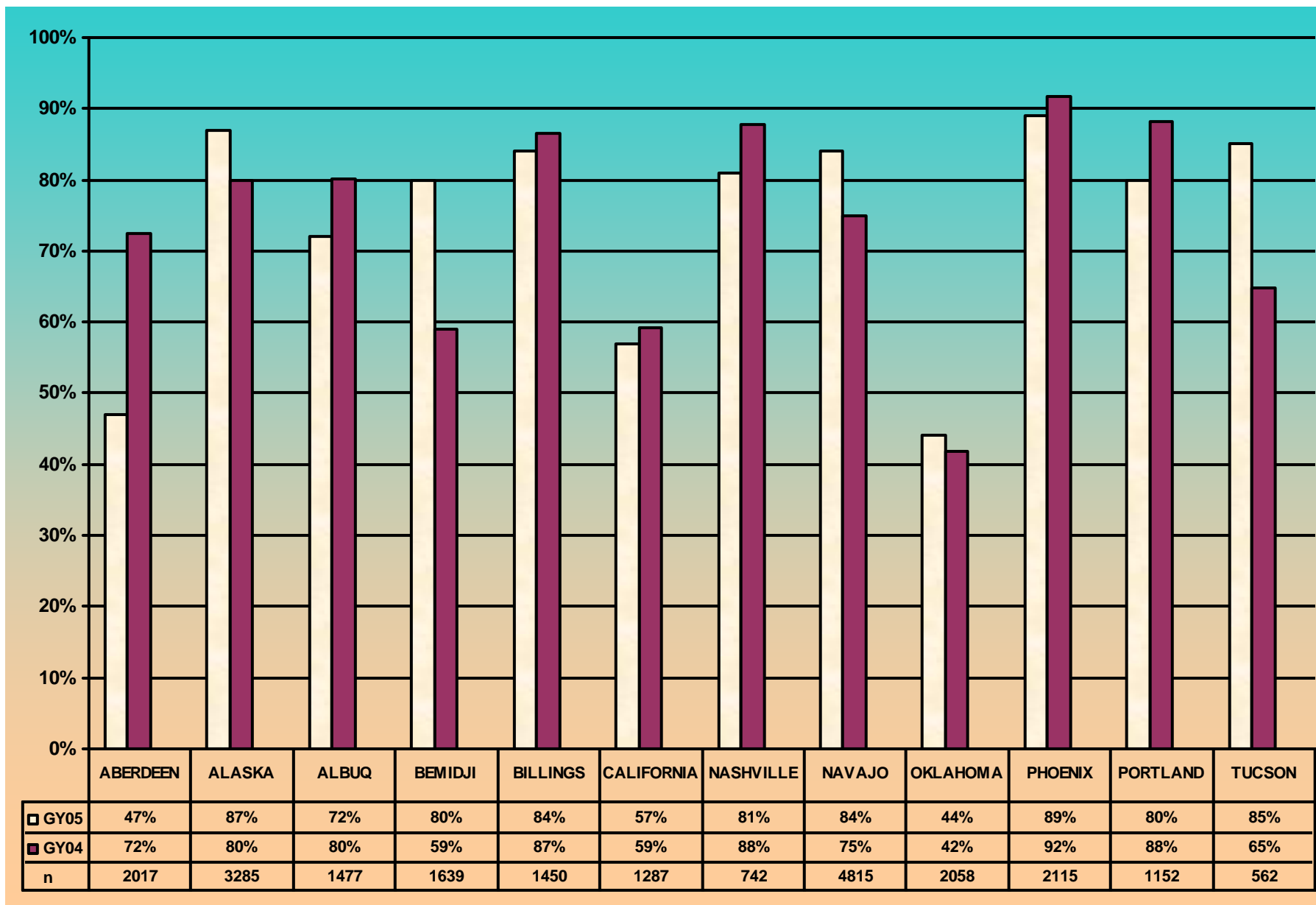


Numerator: *Patients with Pneumococcal vaccine documented ever*

Denominator: *Active Clinical patients 65 and older*

CHILDHOOD IMMUNIZATIONS

GY05 National Average = 75%
 GY04 National Average = 72%
 2010 Goal = 80%



Numerator: Patients who received: 4 DTaP 3 IPV, 1 MMR,
 3 Hib, 3 Hep B (4:3:1:3:3)

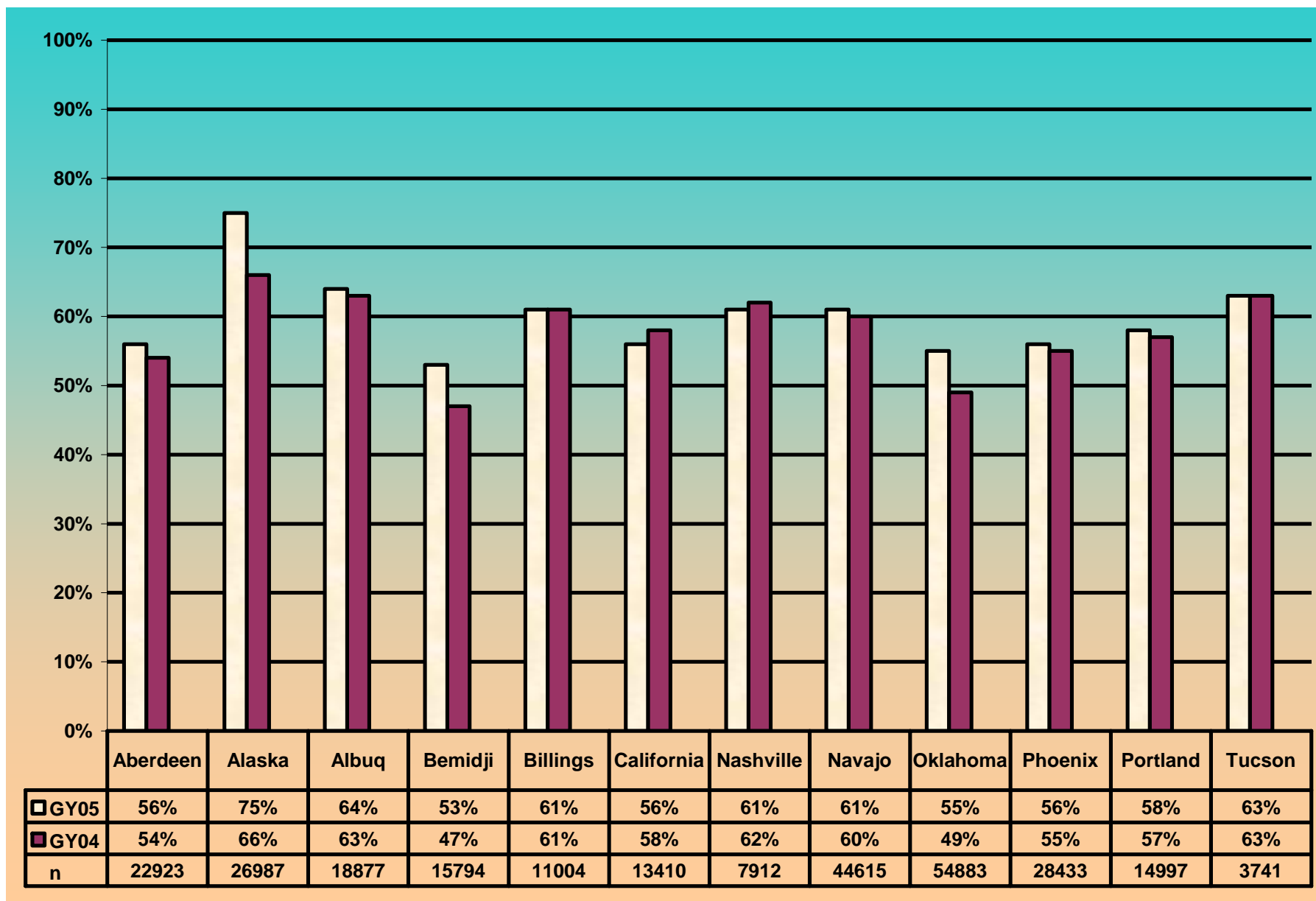
Denominator: Active clinical patients aged 19-35 months

PAP SCREENING

GY05 National Average = 60%

GY04 National Average = 58%

2010 Goal = 90%



Numerator: Patients with a documented Pap Smear in the past 3 years

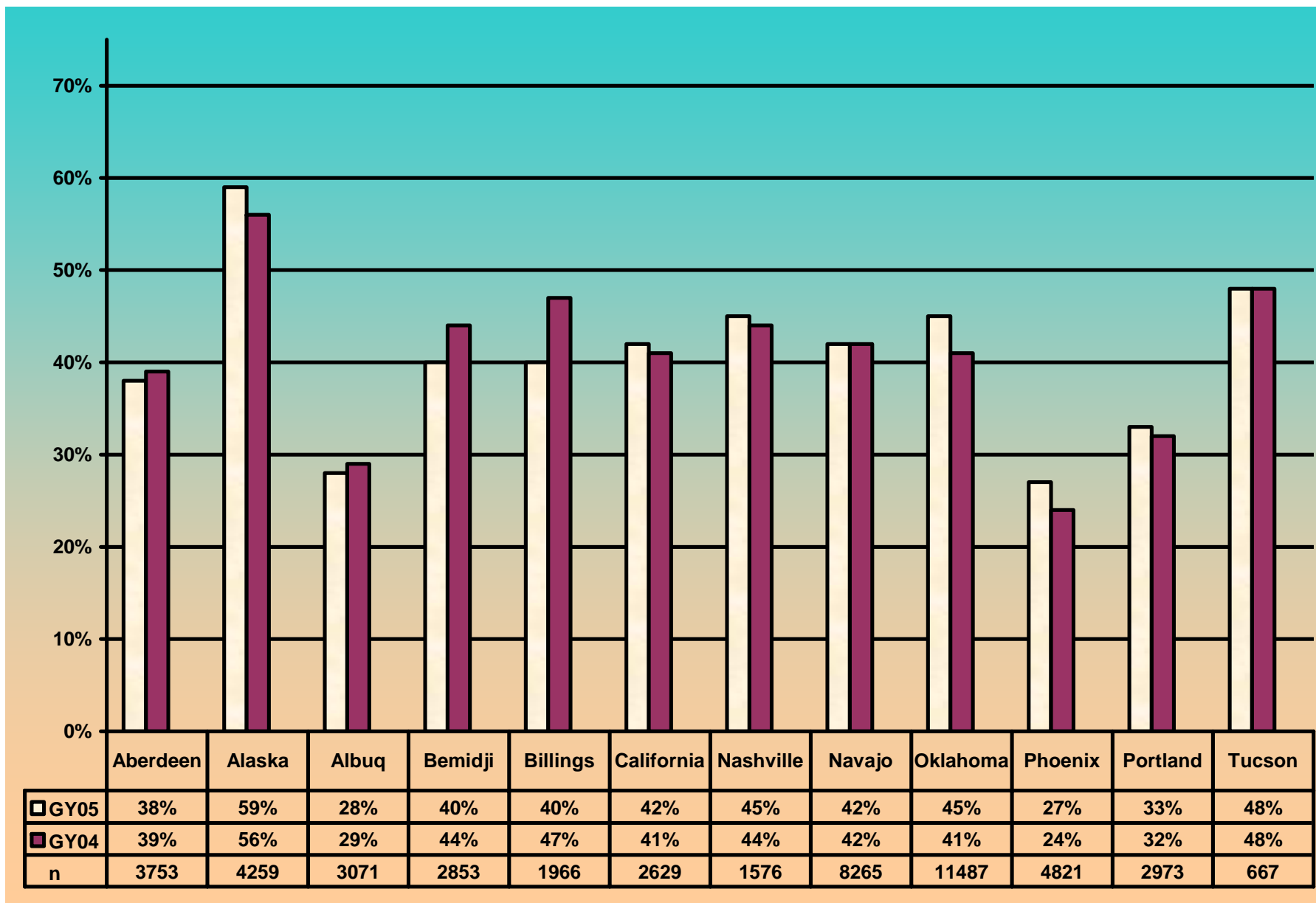
Denominator: Active Clinical female patients ages 21-64 with no documented history of hysterectomy

MAMMOGRAPHY SCREENING

GY05 National Average = 41%

GY04 National Average = 40%

2010 Goal = 70%



Numerator: Patients with a documented Mammogram in the past 2 years

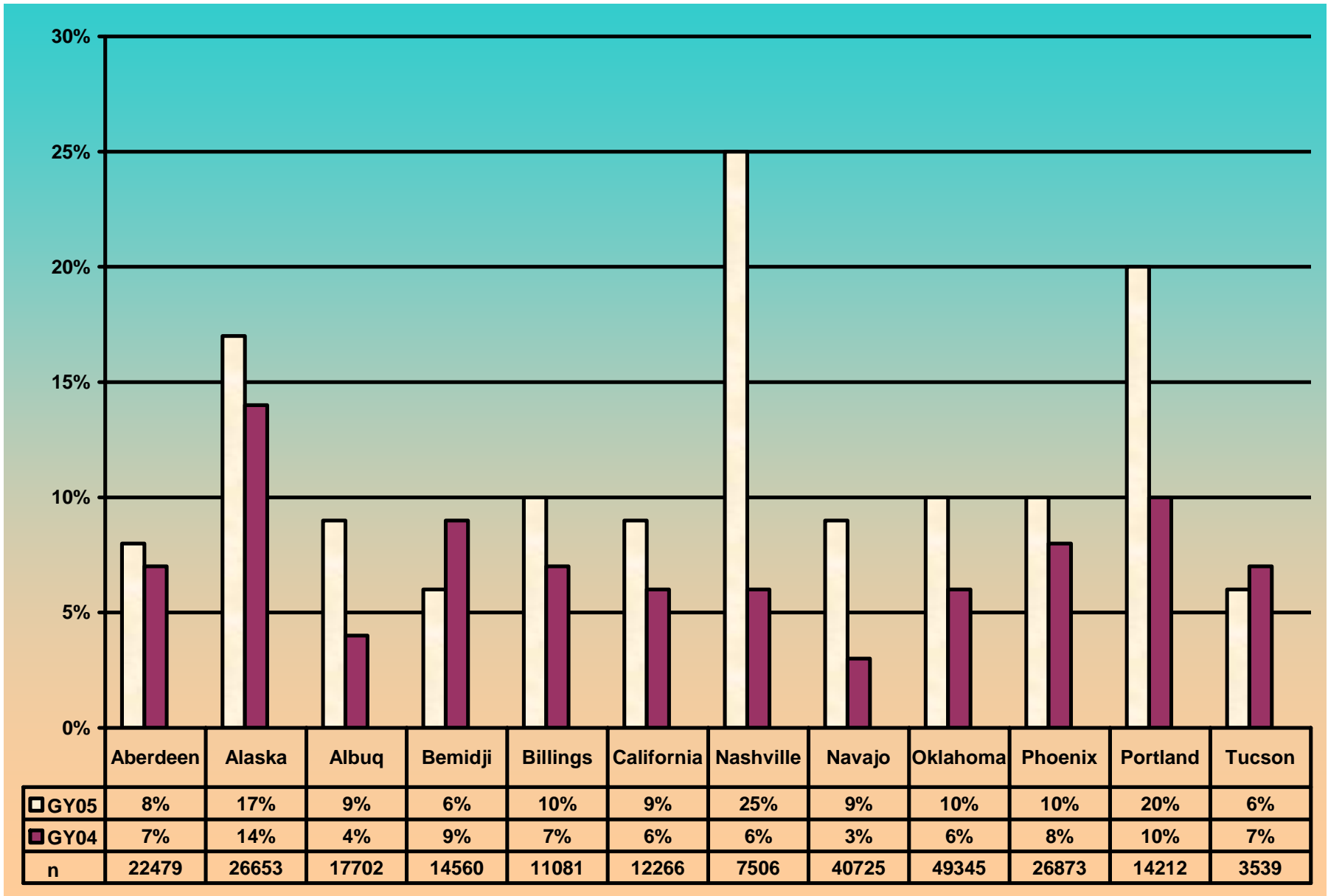
Denominator: Active Clinical female patients ages 52-64*

ALCOHOL SCREENING (FAS PREVENTION)

GY05 National Average = 11%

GY04 National Average = 7%

2010 Goal = 25%

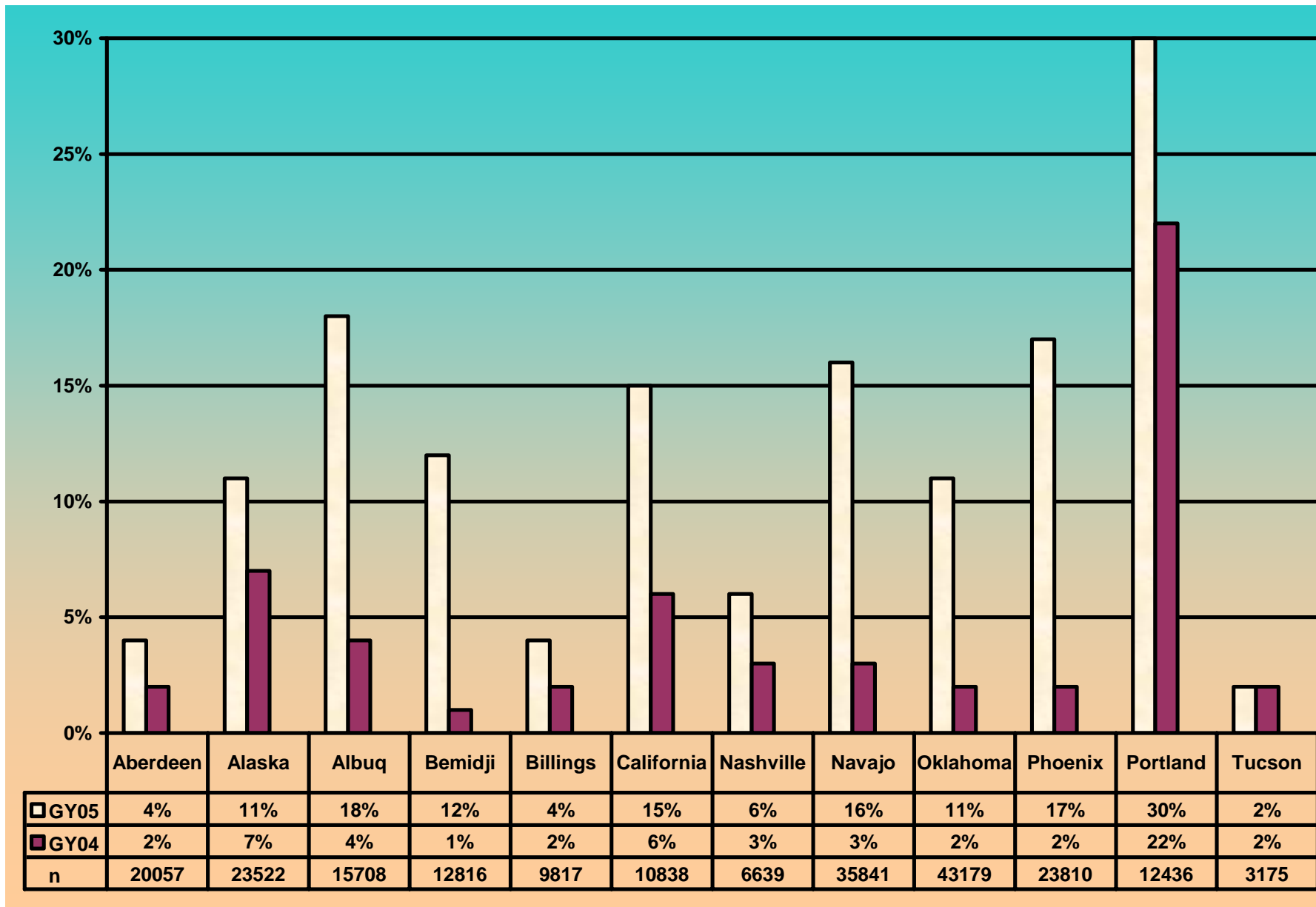


Numerator: Patients screened for alcohol use, who have alcohol-related

Denominator: Active Clinical female patients ages 15-44*

DOMESTIC VIOLENCE/INTIMATE PARTNER VIOLENCE

GY05 National Average = 13%
 GY04 National Average = 4%
 2010 Goal = 25%



Numerator: Patients screened for or diagnosed with DV/IPV

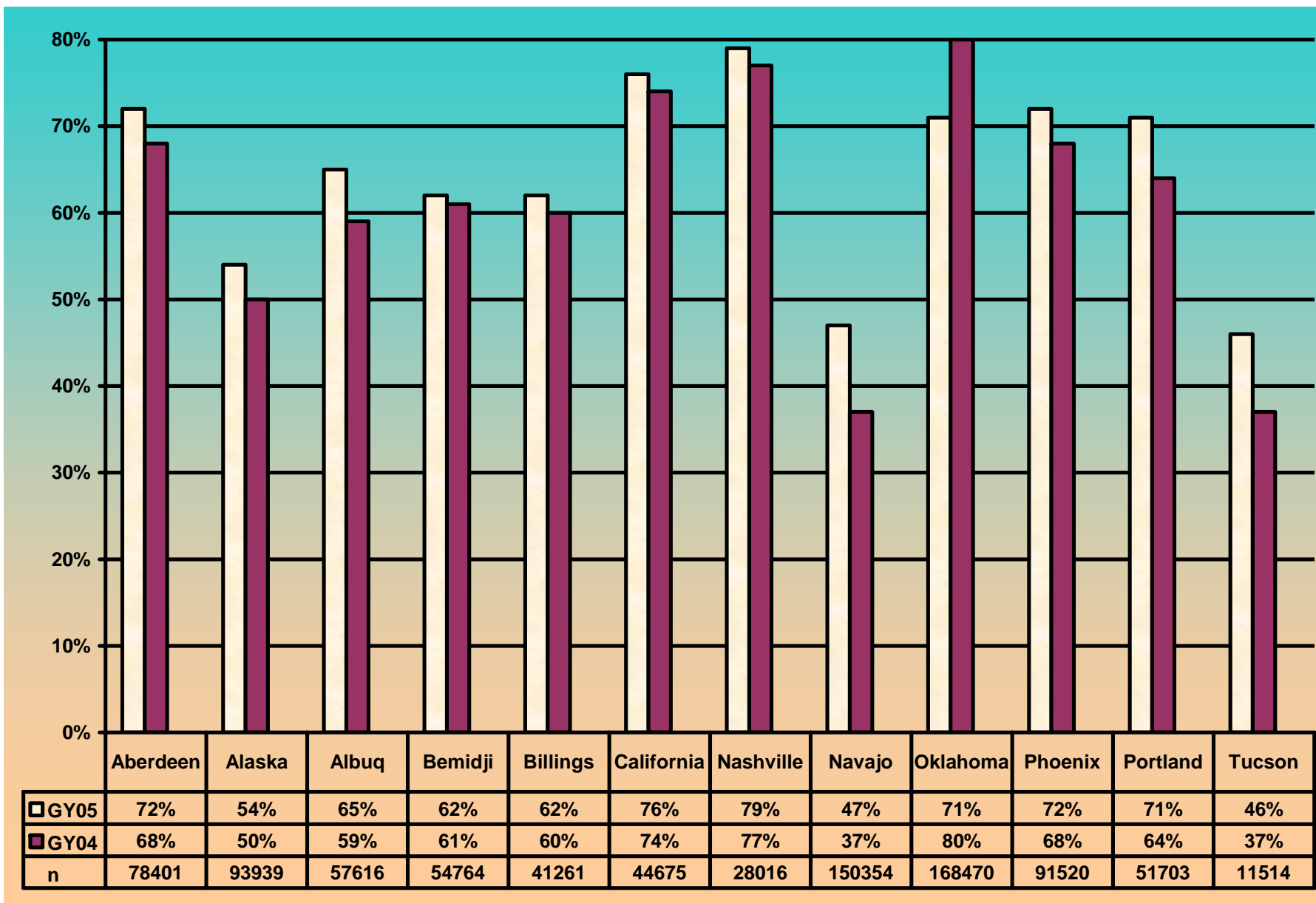
Denominator: Active Clinical female patients ages 15-40

BODY MASS INDEX (BMI) ASSESSMENT

GY05 National Average = 64%

GY04 National Average = 60%

2010 Goal = 90%



Numerator: All patients for whom BMI can be calculated

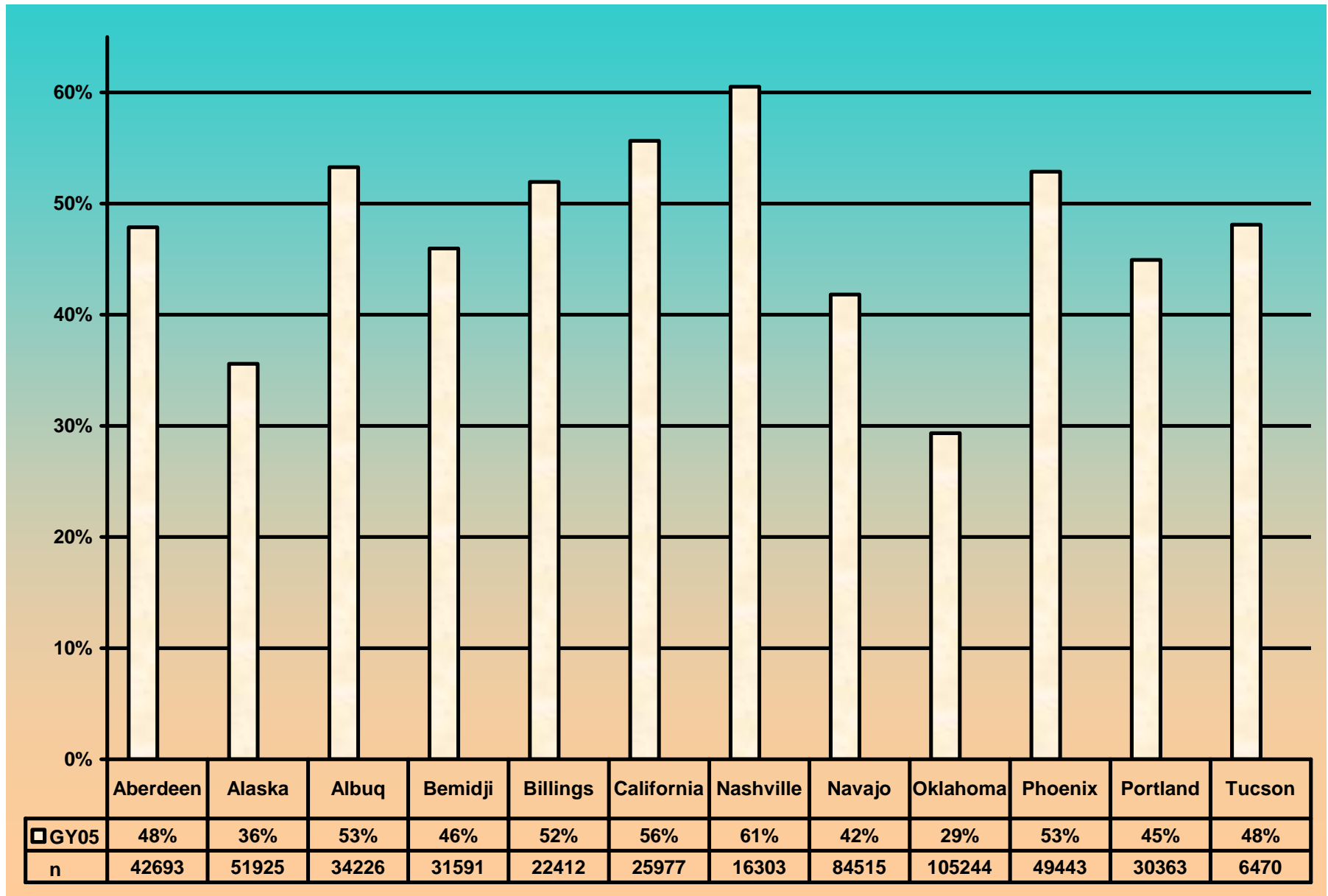
Denominator: Active Clinical patients ages 2-74

CHOLESTEROL SCREENING

GY05 National Average = 43%

GY04 National Average = N/A

2010 Goal = 80%

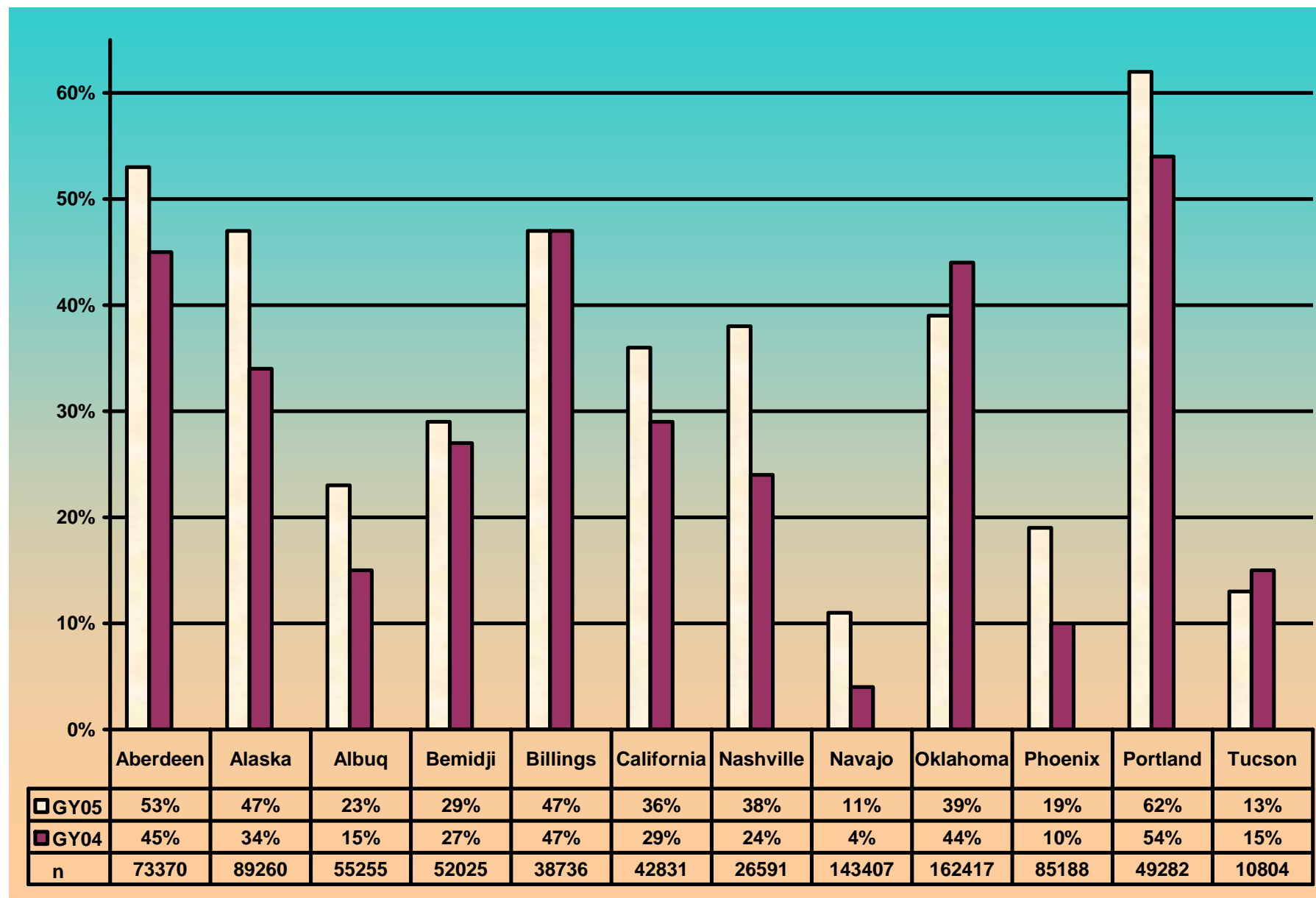


Numerator: Patients with a documented cholesterol screening within 5 years

Denominator: Active Clinical Patients ages 23 or older

TOBACCO USE ASSESSMENT

GY05 National Average = 34%
 GY04 National Average = 27%
 2010 Goal = 75%

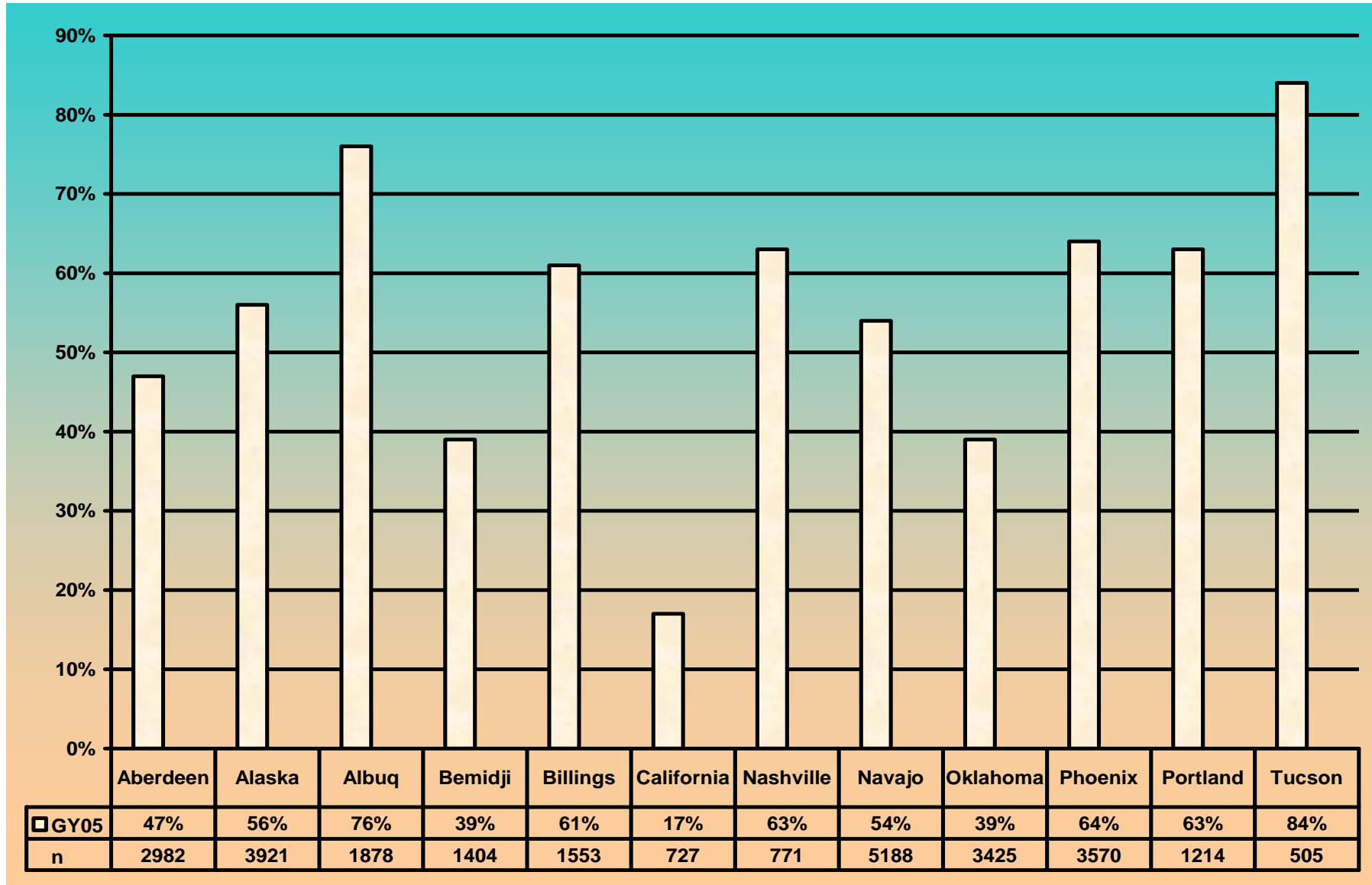


Numerator: Patients screened for tobacco use during the report period

Denominator: Active Clinical patients ages 5+

PRENATAL HIV TESTING

GY05 National Average = 54%
 GY04 National Average = DNA
 2010 Goal = Not Determined



Numerator: Patients who received HIV test counseling and/or education during the past 20 months.

Denominator: All pregnant patients with no documented miscarriage or abortion during the past 20 months



APPENDIX A

Target Measure Table

MEASURE	GY05	GY04	Target From 2004 level	Exceeded	Met	Did Not Meet
Diabetes Diagnosis Ever ^d	11%	10%	N/A ^d			
Documented A1C ^d	78%	77%	N/A ^d			
Poor Glycemic Control ^c	15%	17%	17%	√		
Ideal Glycemic Control	30%	27%	27%	√		
BP Controlled	37%	35%	35%	√		
LDL Assessed	53%	53%	53%		√	
Nephropathy Assessed	47%	42%	42%	√		
Retinopathy Assessed ^e	^e	55% ^e	55% ^e			
Dental-Diabetes Access	39%	37%	37%	√		
Dental-General	24%	24%	24%		√	
Influenza (65+) ^b	59%	54%	On hold	√		
Pneumovax (65+) ^b	69%	69%	69%		√	
Childhood Immunizations ^f	75% ^f	72% ^f	72% ^f	√		
PAP Screening	60%	58%	58%	√		
Mammography Screening	41%	40%	40%	√		
FAS Screening	11%	7%	Increase	√		
DV/IPV Screening	13%	4%	4%	√		
BMI Assessed	64%	60%	65%			√
Cholesterol Screening	43%	^a	Baseline		√	
Tobacco Use Assessed	34%	27%	27%	√		
Prenatal HIV Screening	54%	^a	Baseline		√	
Topical Fluorides		^a	Baseline		√	
Applications Patients	113,324 85,318					
Dental Sealants	249,882	230,295	230,295	√		
Public Health Nursing Visits	438,376	423,379	423,379	√		
MEASURE TOTALS				14	6	1

^a Data not reported for GPRA until FY 2005

^b Placed on hold because of 2004 national vaccine shortage

^c Lower percent is clinical positive for this measure

^d Not GPRA measures, data collected for context only

^e Data collected for pilot sites only

^f Data collected through immunization report, not CRS